



# Sharewealth Chits Limited

SHAREWEALTH FINANCIAL CITY

3rd Floor, Cochin Devaswom Board Sivasakthi Buliding,  
Opp: Nehru Park, Round North, Thrissur-680 001, Tel: 0487 2327441/42/43  
web : www.sharewealthchits.com, email : chits@sharewealthindia.com

## APPLICATION FOR TICKET

Monthly/ Pooval/ Quarterly..... Day Kuri

1. Name																						
Present Postal Address (Block Letters)																						
																Pin						
2. Date Of Birth (if Minor)																			Age			
3. House Name & Door No.																						
4. Mobile																Tel						
5. Father's/ Mother's/ Husband's Name																						
6. Occupation and Monthly Income/ Salary																						
7. Permanent Native Place																						
District, Taluk																						
Village, Desam																						
Post Office, Street																Pin						
8. Name of the Nominee & Relationship																						
Full Address																						
9. E-mail Id																						

### Change of Venue and Total Sala: \_\_\_\_\_

The Foreman of Company also reserves the right to change the venue of the conduct of the chit to any other branch of the company and the same shall be binding on the subscribers. Foreman has the right to increase the total sala by adding more division in kuri, if found necessary. It shall be binding on all subscribers.

Place :

Date :

Sir/Madam,

Having completely read or caused to be read full understood the rules governing the conduct of the chit herein printed, a copy of which was signed and delivered to you, and which is proposed to be you from ..... day of ..... and assented to same. I/We send a sum of Rs. .... (Rupees ..... only) by money order/ Cheque/ remittance/ in cash less the fixed discount and commission Rs. .... being payment of one ticket valued at Rs. .... due for the first instalment. I request you to allot me ..... tickets. I/We agree to any change in the date of the commencement of the chit.

The rules and regulations to this Chit have been read by/ to me and understood by me. I fully assent to the same and agree to abide by the same.

× \_\_\_\_\_  
Signature of Subscriber

Your's faithfully

× \_\_\_\_\_  
Signature of Subscriber

× _____ Signature of Witness	
Address of the Witness .....	
.....	
Place:	Date:

Instalment Amount	Rs. ....
Less-Fixed Discount & Commission	Rs. ....
Net Payable for 1st Instalment	Rs. ....

Ticket No.	Agent Code	Cust. Code	Entd. By	Cashier	Acct. / Manager